



**STATE OF NEW HAMPSHIRE
DEPARTMENT OF SAFETY
DIVISION OF FIRE STANDARDS & TRAINING
BUREAU OF EMERGENCY MEDICAL SERVICES**

Richard M. Flynn
Commissioner

10 HAZEN DRIVE, CONCORD, NH 03305
603-271-4568 TDD Access 1-800-735-2964
Toll Free NH 1-888-827-5367
Fax: 603-271-4567

Richard A. Mason
Director

Suzanne M. Prentiss
Bureau Chief

**TRAUMA MEDICAL REVIEW COMMITTEE
COMMITTEE MEETING**

**August 13, 2003
Richard M. Flynn Fire Academy
Concord, New Hampshire**

Members Present: John Sutton, MD, Richard Johnson, MD, Elisabeth Burns (representing Jesse Greenblatt, MD, Estelle MacPhail, RN, Eileen Corcoran, RN, Sandra Hillsgrove, Heather Page

Guests: Donna York Clark, RN, Janet Houston, Sharon Phillips, RN, Rich Delier

Bureau Staff: Suzanne Prentiss, EMTP, Clay Odell, EMTP, RN, Will Owen, EMTP, Fred von Recklinghausen, EMTP

I. Call to Order

Item 1. The August meeting of the Trauma Medical Review Committee was called to order by Dr. Sutton at 9:39 am on Wednesday August 13, 2003 at the Richard M. Flynn Fire Academy in Concord, NH.

II. Acceptance of Minutes

Item 1. June 18, 2003 Minutes. The minutes of the June meeting were approved by email by all who attended that meeting. The group agreed that this method worked well and would save time at future meetings, so all future minutes will be approved via email.

II. Committee Discussion Items

Item 1. NH Bureau of EMS Update: Chief Sue Prentiss reported that the TraumaS Systems grant continuation application has been completed and submitted. The grantee's meeting, called the State Trauma Leadership meeting will be held in Washington, DC in September and Clay is representing NH.

For further report please refer to the attached August 2003 NH Bureau of EMS Report.

Item 2. Hospital Updates: Dr. Sutton asked how Catholic Medical Center is progressing in pursuing assignment in the NH Trauma System. The issue is still

making its way through the administration at CMC, and Rich Delier, EMS Coordinator is optimistic that administration will agree to participate. The TMRC inquired about CMC's access to orthopedic services. Clay will find out.

Item 3. Fall Trauma Conference: Clay Odell advised TMRC members that the planning for the conference is progressing well. He distributed a draft copy of the conference brochure, and gave a quick synopsis of the featured presentations. There was some discussion about the breakout session portion of the conference. The original idea of the planning committee was to solicit topics of concern during the registration process, then select the top three concerns as the topics for the breakout sessions. The group felt that it might be a good idea to either solicit topics for the breakout sessions ahead of time or give a limited number of choices for attendees to select.

Item 4. Air Medical Notification Project: Will Owen reported that Dispatch agencies and EMS services in the Monadnock Hospital catchment area are still planning to participate in the pilot program, but there have been a few minor items which have delayed implementation. The Berlin area had expressed an interest in participating, but the contact person for that area has not contacted Will. Will has still not made contact with representatives of the Concord area. The TMRC suggested that Will approach the Littleton area as another possible evaluation site.

III. Old Business

Item 1. Committee Re-appointments: TMRC members have all been re-appointed by Department of Safety Commissioner Richard Flynn, and members should have received their letters in the mail by now.

In addition the Professional Firefighters of NH have submitted a letter of nomination to Commissioner Flynn to appoint Mike Pepin, a Firefighter/Paramedic from Concord Fire Department, to the TMRC. The NH Association of EMT's is considering a nominee, and will submit a name soon.

Item 2. System Performance Improvement Project: Fred von Recklinghausen, Research Coordinator presented the data he collected using the refined search criteria that was discussed at the June TMRC meeting. This study used the 2001 Hospital Data Set and matched trauma diagnoses to head injury procedures using ICD-9 codes. The objective was to review how many patients with head injuries actually received neurosurgical procedures for those injuries, and to review hospital transfer patterns and hold times.

The data identified only 37 patients in 2001 who had trauma diagnoses and who had neurosurgical procedures done. 28 of these patients received neurosurgical intervention at the first hospital that they were transported to, 9 were transferred from another facility.

Discussion followed that suggested that the numbers of patients identified by the Hospital Data Set are inaccurate. Fred will next attempt to review data from some facilities that maintain a trauma registry to try and verify the accuracy of the numbers. The results will be discussed at the October meeting. Please see attached Powerpoint file.

Item 3. Brain Trauma Foundation Program: No report.

IV. New Business

Item 1. Trauma Hospital Assignment Reverification Project: A subcommittee was appointed to work on the reverification project. The members of the subcommittee are Estelle MacPhail, Eileen Corcoran, Janet Houston, John Sutton and Clay Odell. Anyone else who is interested in participating in this project should contact Clay. The first meeting will be next week.

Item 2. Trauma System Case Followup: Clay Odell provided feedback on the trauma case that was discussed at the last TMRC meeting. Clay stated that he called the trauma contact person at that hospital and explained who he was and requested a meeting to discuss the circumstances of the particular case that came to his attention and which the TMRC expressed concern over. A meeting was arranged between Clay and three nursing administrators. Clay indicated that his purpose was not to conduct an investigation, but to advise them of the information he received, his concern that good practices of trauma care may not have been adhered to in this instance. Clay reported a favorable outcome of the meeting and the case would be reviewed by the hospital's trauma QI committee.

Item 3. Trauma System Agenda for the Future: Clay distributed copies of the Trauma System Agenda for the Future, which is a document published in October 2002 that was developed by the American Trauma Society and NHTSA. The process of developing the document involved input from a multidisciplinary group of trauma experts from a variety of organizations. The publication is a consensus document consisting of a review of the current status of trauma care in the U.S., a vision of trauma care in 2010 and an action plan for improvement.

Clay pointed out that despite NH's unique needs and unique challenges the NH Trauma System is not intended to exist in a vacuum. Considerations for the best trauma care in our state should balance the unique needs of NH with the ideas and practices of trauma systems throughout the country. As leaders of the NH Trauma

System it is our responsibility to be knowledgeable of the current state of trauma care on the national level and efforts to improve it. Our collective understanding the Trauma System Agenda for the Future will provide a context for our discussions here in NH.

V. Public Comment

None

VI. Adjournment

Dr. Sutton adjourned the meeting at 11:35. He advised the group that the next meeting of the Trauma Medical Review Committee will be held at the Richard M. Flynn Fire Academy on Wednesday October 22, 2003.